

218000111143

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

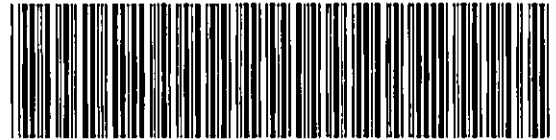
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/05/18--01017--022 **\$0.00

RECEIVED
JAN 9 2019
10:11 AM

2019 JAN -9 AM 7:44

FILED

[Signature] 1/9/19



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 22, 2018

NEENAH RENTALS, LLC
92511 WILLOW LANE
FREMONT, WI 54940

SUBJECT: DAVID A. STURM REAL ESTATE HOLDINGS, LLC
Ref. Number: L18000111143

We have received your document for DAVID A. STURM REAL ESTATE HOLDINGS, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (805) 245-6000.

Brenda L Vorisek
Director

Letter Number: 918A00021624

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: David A. Sturm Real Estate Holdings, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Neenah Rentals, LLC

Name of Person

Firm/Company

9251 Willow Lane

Address

Fremont, WI 54940

City/State and Zip Code

dave@dsprojectmanagement.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Theresa Knowler

239

333-4910

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

2019 JAN -9 AM 7:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

David A. Sturm Real Estate Holdings, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 5/02/2018 and assigned
Florida document number L18000111143

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

9251 Willow Lane

(Principal office address **MUST BE A STREET ADDRESS**)

Fremont, WI 54940

Enter new mailing address, if applicable:

9251 Willow Lane

(Mailing address **MAY BE A POST OFFICE BOX**)

Fremont, WI 54940

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Laurie Smith/Experience Real Estate Group, LLC

New Registered Office Address:

900 SW Pine Island Rd. Unit 107

Enter Florida street

Cape Coral

address Florida, 33991

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.



If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	1031 Reverse Exchange Company I	1520 Royal Palm Sq. Blvd. 320	<input type="checkbox"/> Add
		Fort Myers, FL 33919	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Neenah Rentals, LLC	9251 Willow Lane	<input checked="" type="checkbox"/> Add
		Fremont, WI 54940	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Theresa Knowen

Theresa Knowler, Manager of 1031 Reverse Exchange Company, LLC

Page 3 of 3
Filing Fee: \$25.00

SECRETARY OF STATE
1111 MARSHALL BUILDING
2019 JAN -9 AM 7:44